

HEARTH ACT of 2009

Homeless Emergency Assistance and Rapid Transition to Housing

Planning Preview
Wichita Service Providers
December 6, 2010

Presented by Luella Sanders and Mary K. Vaughn

TODAY'S PURPOSE

- Luella and Mary K. attended HUD scheduled training sessions on the HEARTH Act, in September, 2010
- Initial purpose was to review regulations but they have not been written
- Instead there was review of the HEARTH Act and key provisions
- Participants were encouraged to share key provisions with local communities
- Presentation will be jointly made by City and CoC lead – which is symbolic of the approach legislated by the HEARTH Act

BACKGROUND

- On May 20, 2009, President Obama signed the Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009. The **HEARTH Act** amends and reauthorizes the McKinney-Vento Homeless Assistance Act with substantial changes, including:
 1. A change in HUD's definition of homelessness and chronic homelessness;
 2. A consolidation of HUD's competitive grant programs;
 3. A simplified match requirement;
 4. An increase in prevention resources;
 5. An increase in the emphasis on performance.
 6. The creation of a Rural Housing Stability Program;

Definitions

- An individual or family who lacks a fixed, regular and adequate nighttime residence;
- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings;
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements;
- An individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where he or she temporarily resided;
- An individual or family who will imminently lose their housing within 14 days;
- Unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who:
 - Have experienced a long term period without living independently in permanent housing;
 - Have experienced persistent instability as measured by frequent moves over such period;
 - Can be expected to continue in such status for an extended period of time.
- Any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the
- individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or
- support networks to obtain other permanent housing.

Definitions

At-Risk of Homelessness

- Individual or family
- Income below 30% of area median
- Insufficient resources to attain housing stability

Impact

- 30% of median will make it difficult to obtain sustainability!

Definitions

Chronic Homelessness

- Individual or family
- Living in shelter, safe haven or place not meant for human habitation
- Living in such a place continuously for 1 year or at least 4 separate occasions in last 3 years
- Adult head of household with diagnosable disability

Impact

- Adding families recognizes the fact that they meet these criteria however this also adds to the need
- The City will need to evaluate changes to the Housing First program once this is in place.

Consolidation

Programs

- Emergency Shelter Grant becomes Emergency Solutions Grant
- Emergency Solutions Grant includes HPRP
- Combines Supportive Housing and Shelter Plus Care

Impact

- Changing the name also changes the purpose – there will be fewer funds available for shelter operations

Match

Requirement

- 25% cash or in-kind for the total package
- Leasing costs do not have to be matched

Impact

- Impact is not known but may not present great challenges since it can also be in-kind.
- Impact will be more clear when it is clear how much we would stand to receive

Key Object of McKinney-Vento as amended by HEARTH Act

Improve community capacity to carry out the mission of preventing and ending homelessness

Continuum of Care

HEARTH Act

- Goal: No Family is Homeless for more than 30 days
- HUD to release NOFA no more than 3 months after enactment of appropriations
- Operating Costs are Redefined to Include Service Coordination
- PH Rental Assistance can only be Administered by PHAs or Government

Current

- Service Coordination Included in Supportive Services Category
- SPC Rental Assistance can only be Administered by PHAs or Government

Continuum of Care

HEARTH Act

- Funding for all renewal PH Rent Assistance, Leasing and Operating Costs can come from either HUD's Homeless Assistance Grants OR Project-Based Section 8 Program
- All PH Renewals will be funded non-competitively for one year at a time
- Project Sponsors can request up to 15-year contracts that would be subject to annual appropriations
- Project Sponsors may receive up to 10% for administrative costs

Current

- Renewal comes from HUD's Homeless Assistance Program
- Because of HHS, PH Renewals are funded for one year if CoC application is in accordance with HUD regulations, such as submitted by deadline

Continuum of Care

HEARTH Act

- Community Application
- Consolidates Programs into a Single “Continuum of Care Program”
 - Shelter Plus Care
 - Supportive Housing Program
 - Moderate Rehabilitation/SRO
 - Re-Housing Services
 - ✓ Housing Search
 - ✓ Median or Outreach to Property Owners
 - ✓ Credit Repair
 - ✓ Provision of Security or Utility Deposits
 - ✓ Rent Assistance for Final Month
 - ✓ Assistance with Moving Costs or Other Activities to Help Homeless Persons Move Immediately into PH or have Moved into PH within 6 months

Current

- Similar to Current Collaborative Process
- CoC Application Includes
 - Shelter Plus Care
 - Supportive Housing Program

Continuum of Care

HEARTH Act Funding

- 20% to Emergency Solutions Grant
- Nationwide, 30% to create new permanent supportive housing
 - At least 10% of the 30% PH requirement must provide housing for homeless families
 - With & without a disabled family member

Current CoC Funding

- 10% to Emergency Shelter Grant
- Nationwide, 30% to create new permanent supportive housing
 - Incentives for new PSH required to have at least one member of family who has a disabling condition

Continuum of Care

HEARTH Act

- Systems Approach can...
 - Deal with deep-seated complexity, multiple partnerships, various funding streams
 - Overcome barriers that programs cannot address
 - Facilitate learning and communication
 - Allow best practices to be brought to scale

Current

- Similar to Current Collaborative Process
- CoC Application Includes Focus on Coordination with:
 - Consolidated Plan(s)
 - State Level Dept. with Discharge Planning
 - Mainstream Resources
 - Dept. of Education (new 2010)
 - Veterans Administration (new 2010)

Continuum of Care

HEARTH Act

- Collaborative Applicant
 - Submits consolidated application
 - May designate another entity to apply for & receive grants
 - Responsible for ensuring community participates in HMIS
 - Can receive up to 3% for administrative costs
- Selection Criteria Based on CoC Performance

Current

- Lead Agency
 - Submits consolidated application
- Program Performance

Continuum of Care

CoC Performance

- Reductions in Length of Time People are Homeless
- Reductions in Homeless Recidivism
- Thoroughness in Reaching Homeless People
- Reductions in the Number of Homeless People
- Increases in Jobs & Income
- Reductions in Number of People who Become Homeless

Current CoC Achievements

- Create new PH beds for CH
- Increase % of persons staying in PH over 6 months to at least 77%
- Increase % of persons moving from TH to PH to at least 65%
- Increase % of persons employed at exit to at least 20%
- Decrease the number of homeless households with children

Continuum of Care

CoC Performance Details

- System Level Performance

- Average length of homeless episodes is less than 21 days
- Less than 5% of individuals/families become homeless again
- Number of newly homeless is 10% lower than year before

Current CoC Achievements

- Program Level

- Increase % of persons staying in PH over 6 months to at least 77%
- Increase % of persons moving from TH to PH to at least 65%
- Increase % of persons employed at exit to at least 20%

- System Level

- Create new PH beds for CH
- Decrease the number of homeless households with children

High Performing Communities

Criteria

- Mean length of homelessness in a community is either less than 20 days or reduced by at least 10% compared to the prior year
- Of persons leaving homelessness, fewer than 5% of all persons become homeless again in 2 years or the number of persons becoming homeless again in 2 years is reduced by at least 20%
- Homeless persons are actively encouraged to participate in services available in the geographic area
- Each homeless individual who sought homeless assistance services is in the HMIS

Continuum of Care

Criteria for High Performing

Include:

- Performance
- Planning
- Priorities
- Public and Private Funding
- Mainstream Programs
- Other Populations

Opportunities for Growth

- Example: Demonstrate ability to Meet Established Performance Criteria

**Will Be A Work in Process
for Most CoCs**

Continuum of Care

Planning

- How the number of persons who become homeless will be reduced?
- How the length of time that persons remain homeless will be reduced?
- How the recipient of CoC funds will collaborate with local education authorities to assist in the identification of persons who become or remain homeless and are informed of their eligibility for services under the Subtitle B of the McKinney-Vento Act?

Continuum of Care

Planning (Cont.) – Next Steps

- Address the needs of all relevant subpopulations – incorporate comprehensive strategies for reducing homelessness, including strategies demonstrated to be effective
- Set quantifiable performance measures set timelines for completion of specific tasks
- Identify specific funding sources for planned activities
- Identify an individual or body responsible for overseeing implementation of specific strategies

Concluding Thoughts

- Community needs to begin planning now for 2011 implementation
- Updates will be provided and regulations distributed once they are finalized by HUD and training provided
- Questions???

Discussion Notes

- Programs could look at length of stay guidelines and consider how best to respond in light of the HEARTH Act
- Providers could even more strongly encourage participants to save money while in supported housing
- Engage with housing providers to increase housing options
- Inaccessible housing stock and lack of jobs are two big factors to addressing homelessness
- Segments of community that have not been part of the dialogue—need to be engaged
- Better support for people who are employable but don't have jobs—different training, other strategies to adjust to downturn in job market

Discussion Notes (Cont.)

- Need for more property owners who will take rent subsidies
- Need to work more closely with Dept of Education—especially to work with persons who are doubling up
- Acknowledge that there different needs among people in different types of housing situations
- Revisit data and consider impact the new definition of CH may have for TECH Oversight Committee focus/efforts
- Increasing housing & job options mean talking with others who aren't at the table
- Challenge is to bring new people needed to the table

Discussion Notes (Cont.)

- Need to have conversations with other providers/segments of the community regarding new components coming as part with HEARTH Act (ripple effect)
- Dept. of Health & Human Srvs--PATH grantee will soon be mandated to use HMIS to document street outreach
- Need to use HMIS for better data to bring to the discussion
- COMCARE reported they had 1,259 unduplicated PATH Outreach contacts during a 12 month period in 2009-2010
- Suggest we acknowledge what we are doing well—what each system is doing well
 - Gather data and fine tuning collaborative relationships & understanding of data that is already being collected

Discussion Notes (Cont.)

- Suggest become better informed about what Dept. of Education numbers mean and how they will overlap with new definition in HEARTH transformation
- Already have working relationships with some systems
 - Draw on those cross-system relationships to find common language across systems (i.e., 90 days in one place track the number of times the family moves to different location/living situation)
- Consider additional strategies on how to find and engage with homeless families/youth who are hidden
- Fear a factor for some in coming forward for services/housing due to immigration issues
- May need to do a summer PIT Count to better understand more seasonal issues

Discussion Notes (Cont.)

- USD259 tries to send kids back to school of origin but has found many now coming from other states and not staying long enough to build relationships with school system—more nomadic homeless
- Citywide HMIS could start to identify families/persons who need help/homeless over time and be a better indicator of prevalence than a one-day Point-in-Time Count
- Health clinic also good point of contact for homeless
- Families who are doubling-up are more of a concern for school system than people who meet HUD definition of literal homeless
- Have encountered a fear of sharing SSN for HMIS among residents of the Overflow Shelter